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TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

s are required to respond to a co-	rection of information unless tedisplays a valid office control number.
Application Number	10/044,407
Filing Date	January 11, 2002
First Named Inventor	Dennis M. Hilton
Art Unit	1714
Examiner Name	Toomer, Cephia D.
Attorney Docket Number	6210001

ENCLOSURES (Object of the Authority)			
ENCLOSURES (Check all that apply)			
√	Fee Transmittal Form	Drawing(s) After Allowance Communication to TC	
	Fee Attached	Licensing-related Papers Appeal Communication to Board of Appeals and Interferences	
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Petition Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):	
ļ	SIGNI	TURE OF ARRIVANT ATTORNEY OR AGENT	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name . Nields & Lemack			
Signa	ture III		
Printe	d name Kevin S. Lemack		
Date	November 16, 2005	Reg. Nc. 32,579	

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Signature Typed or printed name

the date shown below:

Kevin S. Lemack

Date November 16, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

CERTIFICATE OF TRANSMISSION/MAILING



RESPONSE UNDER 37 C.F.R. §1.116 **EXPEDITED PROCEDURE** ART UNIT 1714

ED STATES PATENT AND TRADEMARK OFFICE

Applicants

Dennis M. Hilton et al.

Serial No.

10/044,407

Filed

January 11, 2002

For

FOAMED FIREPROOFING COMPOSITION AND METHOD

Examiner

Toomer, Cephia D.

Art Unit

1714

Customer No. :

42754

Attorney

Docket No.

621P001

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

NOTICE OF APPEAL FROM THE EXAMINER TO THE **BOARD OF PATENT APPEALS AND INTERFERENCES**

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the Office Action dated August 24, 2005, wherein the Examiner finally rejected claims 1,5-8, 10 and 11.

A check in the amount of \$500.00 is enclosed herewith for payment of the appeal fee. The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No. 14-0930.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 16, 2005.

Signature: Kevin S. Lemack Date: November 16, 2005

Kevin S. Lemack

Attorney for Applicants Registration No. 32,579

Respectfully submitted,

Nields & Lemack 176 E. Main Street Westboro, MA 01581 TEL: (508) 898-1818

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

NOV 1 8 7005 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ons are required to respond to a collection of information unless it displays a valid OMR control number tion Act of 1995 in Effective on 12/08/2004.
Fees pursuant to the Consolidated Barris Act, 2005 (H.R. 4818). Complete if Known Application Number 10/044,407 TRANSMI <u>January 11.</u> Filing Date 2002 For FY 2005 First Named Inventor Dennis M. Hilton Examiner Name Toomer, Cephia D. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1714 621P001 TOTAL AMOUNT OF PAYMENT (\$) 500.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): Check Nields & Lemack Deposit Account Deposit Account Number: 14-0930 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) X Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) 200 100 500 250 300 150 Utility 130 65 200 100 100 50 Design 80 200 300 150 160 100 Plant 500 600 300 300 150 250 Reissue n 0 200 100 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee Description 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 360 Multiple dependent claims Multiple Dependent Claims Extra Claims Fee (\$) **Total Claims** Fee Paid (\$) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20 Fee Paid (\$) Extra Claims Fee (\$) Indep. Claims - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Extra Sheets Total Sheets (round up to a whole number) x / 50 = - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) \$500.00 Appeal Fee Other:

SUBMITTED BY Registration No. Telephone 508-898-1818 32,579 Signature (Attorney/Agent) Date Nov. 16, Kèvin S. Lemack Name (Print/Type)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.